10/628460

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Q76680

		CLAIMS A	S FILED -		1.2	mn 2)		SMALL EN	NTITY	OR	OTHER		
TOTAL CLAIMS			V					RATE	FEE]	RATE	FEE	1
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE			BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			# _ minus 20=		• 6			X\$ 9=		1	X\$18=		1
INDEPENDENT CLAIMS			9 _ minus 3 =		Ø					OR			
MULTIPLE DEPENDENT CLAIM F								X42=		OR	X84=		
								+140=		OR	+280=	5/4 6	
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in c	olumn 2		TOTAL		OR	TOTAL	7000	r
CLAIMS AS AMENDED - PART II											OTHER		-
_	**************************************	(Column 1) CLAIMS		(Colur		(Column 3)		SMALL		OR	SMALL		1
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 6	Minus	#.Q	0	= 0] [X\$ 9=		OR	X\$18=		
	Independent	. 4	Minus	***	3	= 1		X42=		OR	710U X84=	200	1
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┚╏	440			360 +280=0	0.00	1
								+140=		OR	+280= TOTAL		1
							,	ADDIT. FEE		OR	ADDIT. FEE	200	┨
	<u></u>	(Column 1)		(Colur		(Column 3)	١.)			
MENDMENT B		REMAINING AFTER AMENDMENT	: !	NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	,	
	Independent	*	Minus	***		=]	X42=		OR	X84=	· · · · · · · · · · · · · · · · · · ·	İ
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								_	Un			ł
								+140=		OR	+280=		
							-	TOTAL ODIT. FEE		OR	TOTAL ADDIT, FEE		1
		(Column 1)		(Colur	nn 2)	(Column 3)							1
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	П	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=]	X42=			X84≈		1
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			L
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE		
		mber Previously Pa					er fou	nd in the app	oropriate box	in co	lumn 1.		